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CONFIRMATION NO. 5052

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|---|---|---|------------------------|------------------------------------|
| SERIAL NUMBER 10/767,485 | FILING OR 371(c) DATE 01/29/2004 RULE | CLASS 604 | GROUP ART UNIT 3743 | ATTORNEY DOCKET NO. 6813USD1 |
| APPLICANTS Steve T. Cho, Salinas, CA; | | | | |
| ** CONTINUING DATA ***** This application is a DIV of 09/880,377 06/13/2001 PAT 6,767,341 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/15/2004 | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY CA | SHEETS DRAWING 9 | TOTAL CLAIMS 12 |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | | | INDEPENDENT CLAIMS 1 |
| ADDRESS 41155 | | | | |
| TITLE Microneedles for minimally invasive drug delivery | | | | |
| FILING FEE RECEIVED 770 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |